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UNITED STATES PATENT AND TRADEMARK OFFICE  
WASHINGTON, D.C. 20231  
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Bib Data Sheet

CONFIRMATION NO. 3660

SERIAL NUMBER 09/041,685	FILING DATE 03/13/1998  RULE	CLASS 210	GROUP ART UNIT 1724	ATTORNEY DOCKET NO. W/C-367552
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## APPLICANTS

TERRY JAMES CULLINAN, MISSOULA, MT;

MAX VON WEISS, POLSON, MT;

\*\* CONTINUING DATA \*\*\*\*\* *NONE*\*\* FOREIGN APPLICATIONS \*\*\*\*\* *NONE*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

\*\* 05/21/1998

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Verifed and Acknowledged <i>Allowance</i> Examiner's Signature Initials	STATE OR COUNTRY MT	SHEETS DRAWING 6	TOTAL CLAIMS 9	INDEPENDENT CLAIMS 9
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## ADDRESS

23605

LIEBLER, IVEY &amp; CONNOR, P.S.

1141 N. EDISON, SUITE C

P O BOX 6125

KENNEWICK, WA

99336

## TITLE

VERTICAL VORTEX OR LAMINAR FLOW INTERACTIVE BIO MEDIA WATER TREATMENT DEVICE

FILING FEE  RECEIVED 641	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
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CONFIRMATION NO. 3660

<b>SERIAL NUMBER</b> 09/041,685	<b>FILING DATE</b> 03/13/1998 <b>RULE</b>	<b>CLASS</b> 210	<b>GROUP ART UNIT</b> 1724	<b>ATTORNEY DOCKET NO.</b> P-1534-011
<b>APPLICANTS</b> TERRY J. CULLINAN, MISSOULA, MT; MAX VON WEISS, POLSON, MT; <b>** CONTINUING DATA ***** NONE</b> <b>** FOREIGN APPLICATIONS ***** NONE</b> <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **</b> <b>** 05/21/1998</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <u>Allowance</u> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> MT	<b>SHEETS DRAWING</b> 6	<b>TOTAL CLAIMS</b> 9
<b>INDEPENDENT CLAIMS</b> 9				
<b>ADDRESS</b> 23605				
<b>TITLE</b> VERTICAL VORTEX OR LAMINAR FLOW INTERACTIVE BIO MEDIA WATER TREATMENT DEVICE				
<b>FILING FEE RECEIVED</b> 641	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	

SERIAL NUMBER 09/041,685	FILING DATE 03/13/98	CLASS 210	GROUP ART UNIT 1724	ATTORNEY DOCKET NO. W/C-367552
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APPLICANT

TERRY JAMES CULLINAN, MISSOULA, MT; MAX VON WEISS, POLSON, MT.

\*\*CONTINUING DOMESTIC DATA\*\*\*\*\*  
VERIFIED

FP \_\_\_\_\_

\*\*371 (NAT'L STAGE) DATA\*\*\*\*\*  
VERIFIED

FP \_\_\_\_\_

\*\*FOREIGN APPLICATIONS\*\*\*\*\*  
VERIFIED

FP \_\_\_\_\_

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 05/21/98 \*\* SMALL ENTITY \*\*

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY MT	SHEETS DRAWING 6	TOTAL CLAIMS 9	INDEPENDENT CLAIMS 9
Verified and Acknowledged Examiner's Initials <u>FP</u> Initials _____					

ADDRESS

BIOSEPTIC SYSTEMS  
P O BOX 2725  
MISSOULA MT 59806

TITLE

VERTICAL VORTEX OR LAMINAR FLOW INTERACTIVE BIO MEDIA WATER  
TREATMENT DEVICE

FILING FEE RECEIVED \$641	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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